DELETE the following inventor(s) named in the prior nonprovisional application:

The inventor(s) to be deleted are set forth on a separate sheef attached hereto.

A new power of attorney or authorization of agent (PTO/SB/81) is enclosed.

1213318 v1; Q07@01!.DOC

10/30/2000 YPOLITE1 00000037 09123430

b.

01 FC:131 02 FC:102 710.00 OP 480.00 OP

Information Disclosure Statement (IDS) is enclosed:

11/14/2000 TBELL1 00000005 0 Sale Ref: 00000005 DA#: 041073 01 FC:103 144.00 CH 02 FC:102 400.00 CH

Approved Se through 10/31/2002. OMB 0651-0032

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•)			PTO/SB/29(08-00) h 10/31/2002. OMB 0651-0032		
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number							
CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS		
and the second	TOTAL CLAIMS (37 CFR 1.16(c) or (j))	28 - 47* =		x\$ =	= \$		
	INDEPENDENT CLAIMS (37 CFR 1.16(b) or (i))	14 - 8** =	6	x \$ 80.00 =	= 480.00		
45.00	All controls to the control of the c	ENT CLAIMS (if applicable	e) 37 CFR 1.16(d))	+ \$ =	2		
		mercental e de la como de la como de la como de la como de	Andrew Committee	BASIC FEE (37 CFR 1.16)	710.00		
Æ			Tol	tal of above Calculations	= 1,190.00		
i]		r filing by small entity (No					
Ä		cess of 20 and over original p t claims over original patent	atent.	TOTAL :	= \$ 1,190.00		
7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 4-1073: a. X Fees required under 37 CFR 1.16. b. X Fees required under 37 CFR 1.17. c. Fees required under 37 CFR 1.18. 8. X A check in the amount of \$ 1,300.00 is enclosed. 9. Payment by credit card. Form PTO-2038 is attached. 10. Applicant requests suspension of action under 37 CFR 1.103(b) (fee under 37 CFR 1.17(i) enclosed) 11. New Attorney Docket Number, if desired Prior application Attorney Docket Number will carryover to this CPA unless a new Attorney Docket Number has been provided herein.] 12. a. Receipt For Facsimile Transmitted CPA (PTO/SB/29A) b. X Return Receipt Postcard (Should be specifically itemized, See MPEP 503) 13. X Other: Petition for One Month Extension of Time is attached							
NOTE: The prior application's correspondence address will carry over to this CRAUNLESS a new correspondence address is provided below.							
14. NEW CORRESPONDENCE ADDRESS							
Cus	Customer Number or Bar Code Label Or New correspondence address below						
ame	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP						
ldress	2101 L Street N	~					

15. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Name (Print/Type)	Thomas J. D'Amico			
Signature	LOCAL TO THE PARTY OF THE PARTY			
Registration No. (Attorney/Agent)	28,371			
Date	October 27, 2000			

State

Telephone

DCDistrict of

(202) 785-9700

City

Country

Washington

United States of America